

Office of Health Care Assurance

State Licensing Section

## STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION

<b>Facility's Name:</b> Cacal, Evelyn ARCH	<b>CHAPTER 100.1</b>
<b>Address:</b> 94-1161 Hinaea Street, Waipahu, Hawaii 96797	<b>Inspection Date:</b> June 5, 2019 Annual

**THIS PAGE MUST BE SUBMITTED WITH YOUR PLAN OF CORRECTION. IF IT IS NOT, YOUR PLAN OF CORRECTION WILL BE RETURNED TO YOU, UNREVIEWED.**

**YOUR PLAN OF CORRECTION MUST BE SUBMITTED WITHIN TEN (10) WORKING DAYS. IF IT IS NOT RECEIVED WITHIN TEN (10) DAYS, YOUR STATEMENT OF DEFICIENCIES WILL BE POSTED ONLINE, WITHOUT YOUR RESPONSE.**

19 JUN 19 PM 3:11  
19 JUN 19 PM 3:11  
19 JUN 19 PM 3:11

	<b>RULES (CRITERIA)</b>	<b>PLAN OF CORRECTION</b>	<b>Completion Date</b>
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications</u>. (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><b><u>FINDINGS</u></b> Resident #1 – “Temazepam 15mg, 2 caps by mouth as needed at bedtime” medication bottle in resident’s medication bin. No physician order found for medication in resident’s chart.</p>	<p><b>PART 1</b></p> <p><b><u>DID YOU CORRECT THE DEFICIENCY?</u></b></p> <p><b>USE THIS SPACE TO TELL US HOW YOU CORRECTED THE DEFICIENCY</b></p> <p>PCG went to the office of Dr. R. Romero and obtained a copy of Dr's. order for Temazepam 15mg cap.</p>	June 7, 2019

	RULES (CRITERIA)	PLAN OF CORRECTION	Completion Date
<input checked="" type="checkbox"/>	<p>§11-100.1-15 <u>Medications</u>. (e) All medications and supplements, such as vitamins, minerals, and formulas, shall be made available as ordered by a physician or APRN.</p> <p><b><u>FINDINGS</u></b> Resident #1 – “Temazepam 15mg, 2 caps by mouth as needed at bedtime” medication bottle in resident’s medication bin. No physician order found for medication in resident’s chart.</p>	<p><b>PART 2</b></p> <p><b><u>FUTURE PLAN</u></b></p> <p><b>USE THIS SPACE TO EXPLAIN YOUR FUTURE PLAN: WHAT WILL YOU DO TO ENSURE THAT IT DOESN’T HAPPEN AGAIN?</b></p> <p>To ensure the accuracy of the prescribed medication, the PCG will read the label carefully and compare to the Dr’s. note and administer to the resident as directed, document in the MAR as well.</p> <p>Further, substitute CG’s need to educate <sup>as well</sup> to avoid future repetition of the same mistake.</p>	June 7, 2019

Licensee's/Administrator's Signature: EVERLYN R. COCAL

Print Name: EVERLYN R. COCAL

Date: JUNE 18, 2019